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### **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### **FORM D**

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

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OMB APPROVAL 3235-0076 OMB Number:

Expires: May 31, 2005

Estimated average burden

hours per response . . . . 16.00

SEC USE ONLY				
Prefix	Serial			
<u> </u>				
DATE RECEIVED				

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.) OV	erture Networks, Inc.
Convertible Notes: Warrants and Series A Convertible Prefe Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	rred Stock Offering
A. BASIC DENTIFICATION DATA	
1. Enter the information requested about the issuer	:
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Overture Networks, Inc.	02048545
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2 Davis Drive, Research Triangle Park, NC 27709-2218	(919) 558-2200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
optical networking equipment	
business trust limited partnership, to be formed	please specify):  PROCESSE
Month Year  Actual or Estimated Date of Incorporation or Organization: O O O O O O O O O O O O O O O O O O O	NC THOMAS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	Such Such
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report hereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) Reedy, Jeff Business or Residence Address (Number and Street, City, State, Zip Code) 2 Davis Drive, Research Triangle Park, North Carolina 27709 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) Pate, Prayson Business or Residence Address (Number and Street, City, State, Zip Code) 27709 2 Davis Drive, Research Triangle Park, North Carolina Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) Mann, Alan B. Business or Residence Address (Number and Street, City, State, Zip Code) 2 Davis Drive, Research Triangle Park, North Carolina 27709 ☐ Beneficial Owner Executive Officer Check Box(es) that Apply: General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Bielawski, Bart Business or Residence Address (Number and Street, City, State, Zip Code) 77033 Miller, Chapel Hill, North Carolina Check Box(es) that Apply: Promoter |X| Beneficial Owner Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) Gray, Bernard Business or Residence Address (Number and Street, City, State, Zip Code) Gray Ventures II, LLC, 3330 Cumberland Blvd., Suite 625, Atlanta, Georgia | Beneficial Owner Check Box(es) that Apply: Promoter **Executive Officer** General and/or Managing Partner Full Name (Last name first, if individual) Velk, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) 3600 Glenwood Avenue, Suite 107, Raleigh, North Carolina Check Box(es) that Apply: Director Promoter Beneficial Owner **Executive Officer** General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

B. INFORMATION ABOUT OFFERING													
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No [₹]					
Answer also in Appendix, Column 2, if filing under ULOE.								<u> </u>					
2. What is the minimum investment that will be accepted from any individual?							<sub>\$</sub> 25,	000					
3.	Does the	offering :	permit joint	t ournerchir	of a singl	a unit?						Yes	No
3. 4.			ion request									스	L
	commiss If a person or states	sion or simi on to be lis , list the na	ilar remuner ted is an ass me of the b you may se	ration for so sociated per roker or de	olicitation of son or ager aler. If mor	of purchase nt of a brok re than five	rs in connector or dealer (5) person	ction with s registered s to be liste	sales of sec with the Sl ed are assoc	urities in the EC and/or	ne offering. with a state		
Ful			first, if indi	vidual)				***					
Bus	n/a		Address (N	umber and	Street, Cit	y, State, Z	ip Code)		<del></del>		****		
					·		<u> </u>						
Naı	ne of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check i	individual S	States)		••••••					. [] All	States
	AL	AK	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	н	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	WA WA	OH WV	OK WI	OR WY	PA
Ful	Full Name (Last name first, if individual)												
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)												
Nai	me of Ass	sociated Br	oker or De	aler									
<u></u>	4 i- 317b	ish Danson	Listed Has	Caliaisad	Ida	4- C-1:-:4 1	D						
Sta			s" or check									□ A1	l States
	AL	AK	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	Н	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	ll Name (	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (N	Number and	l Street, C	ity, State, 2	Zip Code)						
Name of Associated Broker or Dealer													
	OT 7 LS.	socialed Di	oker or be										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check "All States" or check individual States)												
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	MT	IN NE	IA NV	NH NH	NJ	LA NM	NY	MD NC	MA ND	ОН	OK	OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	ς		
	Type of Security	Aggregate Offering Price	An	nount Already Sold
	Debt (convertible into preferred stock)	s 800,000	<b>S</b>	626,070
	Equity	\$11,200,000	k 5	0
	Common X Preferred			
	Convertible Securities (including warrants) **warrants  **warrants, having no purchase price, have been issued in Partnership Interestsconnectionwith the issuance of the Convertible debt	\$	) <sub>\$</sub>	0
	**warrants, having no purchase price, have been issued in Partnership Interestsconnectionwiththeissuanceofthe	\$	s	
	Other (Specify	\$	s	
	Total		s	626,070
	Answer also in Appendix, Column 3, if filing under ULOE.		-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e		
		Number Investors		Aggregate  Oollar Amount  of Purchases
	Accredited Investors		\$_	
	Non-accredited Investors		\$	
	Total (for filings under Rule 504 only)		<b>\$</b> _	
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of	D	Oollar Amount
	Type of Offering	Security		Sold
	Rule 505		- \$_	
	Regulation A		_ \$_	
	Rule 504		_ \$_	
	Total		_ \$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		<b>S</b>	
	Printing and Engraving Costs		<b>S</b>	
	Legal Fees	<u>X</u>	\$	50,000
	Accounting Fees		\$	
	Engineering Fees		\$	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify)		\$	
	Total		<u> </u>	50,000
*s	ubject to increase to \$11,373,930 to the extent the remaining onvertible debt is not issued.	-		

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	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C—proceeds to the issuer."	-Question 4.a. This difference is the "adjusted gro	oss	<sub>\$</sub> 11,950,000
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Pa	by purpose is not known, furnish an estimate as of the payments listed must equal the adjusted gro	nd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🛭 \$ 640,000	s
	Purchase of real estate		🗆 \$	s
	Purchase, rental or leasing and installation of ma		_	
	and equipment			
	Construction or leasing of plant buildings and fa		·· [] \$	\$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)			
	Repayment of indebtedness			
	Working capital			
	Other (specify):			_
			·· 🔲 \$	s
	Column Totals		🛭 § 640,000	x \$11,310,000
	Total Payments Listed (column totals added)		_	1,950,000
		D. FEDERAL SIGNATURE	and the state of	Strangerical Stran
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furiformation furnished by the issuer to any non-accordance.	rnish to the U.S. Securities and Exchange Com	mission, upon writte	
Iss	uer (Print or Type)	Signature 00 0	Date	···········
	Overture Networks, Inc.	Jeff Kledy	7-3-C	ス
	ne of Signer (Print or Type) Jeff Reedy	Title of Signer (Print or Type) President	-	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?								
	See Appendix, Column 5, for state response.								
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.									
Issuer (Print or Type)		Signature	Date						
Overture Networks, Inc.		Jeff Ren	フ・3・Cス						
	Print or Type) E Reedy								

Jeff Reedy

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.